

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	N.A		02/15/01
O.I.P.E. CLASSIFIER		12	3/19
FORMALITY REVIEW	T.A	JCMY	05/09/01
RESPONSE FORMALITY REVIEW	MS	JC906	11/30/01
	32	897	05-15-02

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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830  
 11/30  
 01/15/02